

CLAIMS ONLY							Application Number		Filing Date	
<div style="font-size: 1.5em; font-family: cursive;">cancel 1-10</div>							<div style="font-size: 1.5em; font-family: cursive;">09/808468</div>			
* May be used for additional claims or amendments										
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT					
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										
16										
17										
18										
19										
20										
21										
22										
23										
24										
25										
26										
27										
28										
29										
30										
31										
32										
33										
34										
35										
36										
37										
38										
39										
40										
41										
42										
43										
44										
45										
46										
47										
48										
49										
50										
Total Indep										
Total Depend										
Total Claims										